

Name (print) FRANKIE Sue Del Papa Office (if applicable) Primer A Hordey Gen. STATEWIDE
Mailing Address (include city and zip code) 1441 Alta St. Reno, NV 89503 District (if applicable)
E-Mail Address _____ Telephone No. _____

Select Appropriate Box(es) ☐ CANDIDATE ☐ PAC ☐ BAG ☐ POL. PARTY ☐ IND. EXP. ☐ AMENDED ☒ ANNUAL FILING

- ☒ **Annual Filing - Due January 15, 2004**
Period: January 1, 2003 – December 31, 2003
- ☐ **Report #1 — Due August 31, 2004**
Incumbents in an Office with a 4-year term Period: Jan. 5, 2001 — Aug 26, 2004
Incumbents in an Office with a 6-year term Period: Dec. 20, 1998 — Aug 26, 2004
All others Period: Jan. 1, 2004 – Aug. 26, 2004
Ballot Advocacy Groups (BAGs) only: Period: Dec. 5, 2002 – Aug 26, 2004
- ☐ **Report #2 Due — October 26, 2004**
Period: Aug. 27, 2004 — Oct. 21, 2004
- ☐ **Report #3 Due — January 15, 2005***
BAGs only: Period: Oct. 22, 2004 — Dec. 31, 2004
Period: Oct. 22, 2004 - Dec. 5, 2004
- ☐ **Annual Filing — Due January 15, 2005**
Period: January 1, 2004 – December 31, 2004

FILE
JAN - 5 2004
DEAN HELLER
SECRETARY OF STATE
FOR OFFICE USE ONLY

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* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100		
2. Total Monetary Contributions Received of \$100 or Less		
3. Total Amount of Monetary Contributions Received (Add Lines 1 and 2)		
4. Total Value of In Kind Contributions Received in Excess of \$100		

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100	1829.89
6. Total Monetary Expenses Paid of \$100 or Less	
7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)	1829.89
8. Total Value of In Kind Expenses in Excess of \$100	

ACCOUNT CLOSING BALANCE
REQUESTED AS OF 12/31/03

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature Frankie Sue Del Papa Date 12-31-03